

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	FCW	19	3/11/2001
FORMALITY REVIEW	FL	870	64-23-01
RESPONSE FORMALITY REVIEW	JK	835	07/18/01

# INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)... Canceled                      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Date
Final	
Original	
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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CC  
 03-23-01